



LOW MILK SUPPLY

Your milk supply is considered low when there is not enough breast milk being produced to meet your baby's needs.

Many mothers worry about their milk supply, especially in the early stages of breastfeeding. In fact, women who have stopped breastfeeding will most commonly say it was because they "didn't have enough milk". But nearly all mothers do produce enough milk for their babies.

If your breast milk supply is genuinely low it is usually a temporary situation and can be improved with the right support. If you are concerned about your supply it is important to seek advice from your maternal and child health nurse, a lactation consultant, the Australian Breastfeeding Association, your local doctor or other health care professional.

There are some common reasons why women may think their milk supply is low.

"My baby feeds too often"

Babies naturally feed frequently (normally 8–12 times in 24 hours), and in the early days babies can be very unsettled, but this does not mean that there is not enough milk. In fact, frequent feeding is necessary to establish a good breast milk supply.

There is good information about breastfeeding early days in the fact sheet: *Breastfeeding: Getting Started*

"My breasts feel soft"

When your milk supply adjusts to your baby's needs your breasts may not feel as full (this may occur anywhere between 3–12 weeks). As long as your baby continues to feed well, your breasts will produce enough milk for your baby.

"My baby has suddenly started to feed more frequently"

Your baby may wish to feed more during a 'growth spurt', but this increased feeding over a couple of days will help you to increase your supply.

"My baby only feeds for a short time"

This is no cause for concern as long as your baby continues to grow. After two or three months babies will often take less time at the breast when feeding but still be getting all they need.

Signs your baby is having enough milk

After the first week following birth, your baby should:

- » wake for feeds by themselves
- » settle between most feeds
- » have at least 6–8 soaked nappies (4–5 heavy disposable nappies) in 24 hours
- » pass a soft yellow stool at least once a day.

Your baby should be back to birth weight by approximately two weeks of age and gaining an average of 150 grams or more per week for the first three months of life.

Possible causes of low supply

- » Your baby is not attaching well at the breast. This may also cause nipple pain and damage.
- » Your baby does not feed often enough. Nearly all babies need to feed at least 8–10 times in 24 hours.
- » Your baby does not feed effectively at the breast.
- » You have started using formula milk as well as breastfeeding.
- » You have had breast surgery that is effecting your milk supply, in particular breast reduction.
- » You have recently had mastitis.
- » You are taking oral contraceptive pills containing oestrogen.
- » You smoke cigarettes.
- » Some medications, including over-the-counter and herbal preparations, such as cold/flu tablets, may reduce your milk supply.
- » Rarely, there may be reduced or no milk production because of a medical condition. This occurs in less than five per cent of mothers.

How to increase your milk supply

The key to increasing your milk supply is frequent stimulation and emptying of the breasts. This may take some time and it is important that you seek advice and support from a lactation consultant, your maternal and child health nurse or other health care professional skilled in breastfeeding management.

- » Hold your baby “skin to skin” at the breast (baby is dressed in a nappy only, so that there is direct skin contact between you and your baby). This will help to keep your baby awake and also to increase the release of hormones involved in breast milk production.
- » Breastfeed frequently, 2–3 hourly – a total of at least 8 feeds in 24 hours. Your baby may need to be woken for some feeds, or may wake to feed even more often.
- » Make sure that the attachment to your breast is good and that your baby is both sucking and swallowing (you may need to seek help with this).
- » Switch feed; offer each breast twice. When you notice your baby is becoming tired or not swallowing very frequently anymore, take your baby off that breast and “switch” to the next side. Repeat on both breasts twice. This will ensure your baby is draining the breast more efficiently.
- » Express after breastfeeds to provide further stimulation to your breasts and to ensure that your breasts are well drained. This will help increase your milk supply.
- » If your baby is sleepy at the breast and not feeding well you may need to cut short the feed and use the time to express each breast twice, for example, five minutes left side, five minutes right side and then repeat. The expressed breastmilk should then be fed to your baby.
- » When you are breastfeeding or expressing, compress or massage your breasts to assist with milk flow and drainage.
- » If you need to give your baby extra milk, give expressed breast milk separately and always before any infant formula. Seek advice from a lactation consultant or other health professional before commencing infant formula.
- » Sometimes prescription medicines are used to assist with increasing milk supply; these are available from your doctor.

Talk to your care provider about strategies to manage feeding and expressing while you are increasing your milk supply. Often it takes about one hour to feed and express. Then you and your baby can rest between feeds.

Where to get more information

Australian Breastfeeding Association

Tel: 1800 686 268 – Breastfeeding Helpline
W: www.breastfeeding.asn.au

Maternal & Child Health Line (24 hours)

T: 13 22 29

Women’s Health Information Centre (WHIC)

Royal Women’s Hospital
T: (03) 8345 3045 or 1800 442 007 (rural callers)
E: whicinfo@thewomens.org.au

Breastfeeding information at the Women’s

www.thewomens.org.au/health-information/breastfeeding/

Related fact sheets

- » Breastfeeding; Getting started
- » Expressing breast milk
- » Domperidone for increasing milk supply